EMPLOYMENT CRIMINAL HISTORY BACKGROUND CHECK

Utah Code Annotated 53-10-108 allows the release of Utah Criminal History information to qualifying entities. Determination of your agency's eligibility may be made by referring to this code.

The procedure for requesting Criminal History background information can be provided in one of three ways:

1. Name/DOB search \$10.00 – Completed name list (BCI form 02-18-04) must be submitted by qualifying entity at time of request. This search will check the following files: Utah Criminal History, Utah Statewide Warrant and Protective Order, and Federal Want and Warrant files. Turnaround 7-10 days.

If a hit is made by name on a criminal history record or warrant you will receive notification that the subject of record *may* be the person of your inquiry. Information regarding the criminal history or warrant will be included.

Name checks are based only on information you submit. Include the full name of all applicants, as well as maiden names and formerly used last names (do not use initials). Assure that all other identifying information is included for each applicant.

*2. Fingerprint Verification Search \$15.00 – Fee, two fingerprint cards per applicant and completed name list (BCI form 02-18-04) must be submitted by qualifying entity at time of request. This search will check the following files: Utah Criminal History, Utah Statewide Warrant and Protective Order, and Federal Want and Warrant files. An additional search will check the fingerprint files of the following states: Alaska, Idaho, Montana, Nevada, Oregon, Utah, and Wyoming. Turnaround – 3 to 4 weeks. For an additional \$5.00 the fingerprints will be retained in the AFIS database (applicable only to those entities with statutory authority.)

You will need to include a completed applicant fingerprint card along with BCI form 02-18-04.

*3. BCI Fingerprint/FBI Check \$34.25 – fee, two fingerprint cards per applicant and completed name list (BCI form 02-18-04) must be submitted by qualifying entity at time of request. Please note on the form that you are requesting an FBI check under statutory authority. Check consists of the Western Identification Network, Utah Criminal History, Statewide Warrant and Protective Order, Federal Want and Warrant, and FBI criminal history files. Turnaround time is 3 to 4 weeks. For an additional \$5.00 the fingerprints will be retained in the AFIS database (applicable only to those entities with statutory authority.)

Fingerprint cards must contain the following:

- 1. All descriptive information
- 2. The *OCA* field with the code assigned to your agency. Please contact BCI for this code.
- 3. The *Reason Fingerprinted* field with: the specific UCA Code authorizing requests.

import	onducting criminal background checks, complete and accurate identification of the individual being checked is of critical cance. It is misleading to think that a computer name check is sufficient to make employment decisions. However, the on is up to the agency on which type of background you choose.
	A signed waiver must be kept on file by the employing agency. Do not send to the Bureau of Criminal Identification
	The information submitted must be typed, if possible. Additional copies may be found on our website at www.bci.utah.gov/Admin/fiduciary_security.pdf
	A money order, cashier's check, commercial business check made payable to the Utah Bureau of Criminal Identification , or credit card number must accompany all requests. If sending multiple money orders/checks, they must be sent in an orderly fashion. Numbering the listed names on our form and listing a corresponding number on the money order/check would be acceptable. Please be advised that fees are subject to change due to legislative mandate.
	Each request sheet must include your agency's full name and address (including street, suite, city, state, zip code and phone number), an authorized signature , the category for which your agency qualifies, and the type of background check requested.
	Criminal History or Warrant information received by the requesting agency may not be photocopied and given to the applicant. You may review the information with the applicant in person and if the applicant wishes to

By signing this request you are certifying that you are using any information obtained properly and in accordance with state law.

have a copy of the information they must make an application at the Utah Bureau of Criminal Identification.

UTAH BUREAU OF CRIMINAL IDENTIFICATION

3888 W 5400 S - BOX 148280 - SALT LAKE CITY UT 84114-8280 (801) 965-4445 (Name/DOB) or (801) 965-4569 (Fingerprints)

REQUEST FOR CRIMINAL HISTORY INFORMATION FOR EMPLOYMENT PURPOSES

REQUESTING AGENCY/COMPANY					
Agency/Company Name	WD#	Requesto	or's Name		
Complete Address		((one Number		
I certify this request is made pursuant to UCA 53-10-108 and Public Law 1 and accurate. I understand that further dissemination or other use of any crisigned by all applicants and are on file with this office. I understand that signed	iminal history informat	ion is prohibited by law. 1	I further certify that waiver forms have been		
Authorized Signature		Date			
PURPOSE ☐ Fiduciary Funds*	FEE** □ \$10.00 Name/I	OOB	□\$34.25 WIN/FBI		
Describe job or duties	□\$15.00 Fingerp	rint Check	Statutory Authority Only No retention in AFIS database		
☐ National Security	No retention in		(Must include fingerprint card)		
Describe job or duties			□ \$39.25 WIN/FBI		
☐ Commissioner Public Safety Approval	\$20.00 Fingerp Statutory Author	rint Check ority Only	Statutory Authority Only Retention in AFIS database		
☐ Other statutory authority*	Retention in da		(Must include fingerprint card)		
*Note the reason or statute that authorizes requests	Total # of Searche	sTotal \$	es a criminal conviction or warrant		
	box prior to the ap on will be enclosed		es a criminal conviction or warrant		
1. ☐ NAME	N	I/F DOB	SSN:		
DR LIC #/UT	USED LAST NAM	ES			
2. □ NAME	M	I/F DOB	SSN:		
DR LIC #/UT	USED LAST NAM	ES			
3. \(\sum \) NAME	M	I/F DOB	SSN:		
DR LIC #/UT/FORMERLY USED LAST NAMES					
4. □ NAME	M	I/F DOB	SSN:		
DR LIC #/UT					
5. \(\sum \) NAME	N	I/F DOB	SSN:		
DR LIC #/UT	USED LAST NAM	ES			
6. NAME	M	I/F DOB	SSN:		
DR LIC #/UT	USED LAST NAM	ES			
7. □ NAME	N	I/F DOB	SSN:		
DR LIC #/UT	USED LAST NAM	ES			
8. \(\sum \) NAME	N	I/F DOB	SSN:		
DR LIC #/UT	USED LAST NAM	ES			
BCI FORM 02-18-04					

METHOD OF PAYMENT (Check appropriate box f	or payment)
1	Check (Payable to "Utah Bureau of Criminal Identification"), or
Credit Card # must accompany all requests. **Fees subject to	
☐ Credit Card ☐ Visa OR ☐ Master Card	
Card Number	* 3 digit control # Expiration Date
PRINT Name as it appears on the card:	
Cardholder signature:	
MAILING ADDRESS ON CREDIT CARD STATEMENT:	
•	Waiver
Qual	lifying Entity
Quai	Trying Entity
	Address
In connection with my application for employment in a position	n which involves: (Check one)
7 11 1 7 1	,
☐ Fiduciary Funds	*
☐ National Security	
☐ Commissioner of Public Safety Approval	
Other statutory authority	*
*Note the reason or statute that authorizes requests	
I hereby authorize the above named agency to review my past a	and present employment, education, and to conduct a criminal
background check to ascertain any and all information which m	
	m any damages of, or resulting from, furnishing such information.
Prospective Employee Signature	Date
Agency Authorized Representative Signature	Date
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